PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number
PP/1-21480/A/CO

(Column 1) (Column 2)								TYPE		OR SMALL ENTITY		
TOTAL CLAIMS			15	K			Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	E	BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			/5 minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		*		j	X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT				ľ	+140=	(OR	+280=	
* If	th difference	in column 1 is	less than zero, enter "0" in column 2				L	TOTAL		OR	TOTAL	740
	C	LAIMS AS A	MENDED - PART II								OTHER THAN	
	- : : ,	(Column 1)			mn 2)	(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 19	Minus	** /	20	0		X\$ 9=		OR	X\$18=	
	Ind pendent	* 2	Minus		<u> </u>	40		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
							A	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	11	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CL AIAA	=	ļΓ	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JETIPLE DE	PENUEN	I CLAIM		」	+140=		OR	+280=	
							L	TOTAL			TOTAL	
		(Column 1)		(Colu	ımn 2)	(Column 3)		DDIT. FEE I			ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER MOUSLY FOR	PRESENT EXTRA][RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=-	1	X42=			X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
** If the entry in column 1 is less than the entry in column 2, Write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		mber Previously Pa					er four	nd in the and	propriate box	c in co	lumn 1.	